WICHITA BOARD OF ZONING APPEALS VARIANCE

INSTRUCTIONS FOR FILING AN APPLICATION

- 1. An application for a variance must be signed by all property owners or by the authorized agent(s) of such owners.
- 2. The applicant must submit a certified listing from an abstract company of the names and current mailing addresses (including zip codes) of all owners of the application area, as well as all property within 200 feet of the application area.
- 3. The applicant must submit a <u>written statement</u> outlining in detail the manner in which it is believed that this application will meet the following criteria:
 - a. That the variance requested arises from condition which is unique to the property in question and which is not ordinarily found in the same zone or district; and is not created by an action of the property owner or the applicant;
 - b. That the granting of the permit for the variance will not adversely affect the rights of adjacent property owners or residents;
 - c. That the strict application of the provisions of the Zoning Code from which a variance is requested will constitute unnecessary hardship upon the property owner represented in the application;
 - d. That the variance desired will not adversely affect the public health, safety morals, order, convenience, prosperity, that general welfare, or the harmonious development of the City or County, as the case may be; and
 - e. That granting the variance desired will not be opposed to the general spirit and intent of the Zoning Code.

Applications will not be accepted without written justification of these five factors.

4. The applicant must submit a sketch in triplicate, on paper no larger than 11" x 17", drawn to scale and showing the lot or lots included in the application, the structures existing thereon, and the structures contemplated necessitating the variance requested. All appropriate dimensions should be included and any other information which would be helpful to the Board of Zoning Appeals in consideration of the application. The sketch shall be of sufficient quality and darkness to permit reproductions by copy machine.

5. The above-listed documents shall be submitted together with the required fee. The fee should be made by check, payable to the City of Wichita. The following is the fee schedule:

Residential \$380 + \$28/Zoning Lot

Additional variance on same lot \$110

Non-Residential \$550 + \$28/Zoning Lot

Additional variance on same lot \$165

Modified Site Plan Review \$85

Time Extension for BZA Conditions \$55

- 6. In accordance with the Sign Policy adopted by the Board of Zoning Appeals, the applicant shall be responsible for posting zoning adjustment signs on the application site. The fee per single face sign is \$3. See Sign Policy for instructions on how, where, and when to post signs.
- 7. All documents and the fee shall be submitted to the Wichita Board of Zoning Appeals, %Metropolitan Area Planning Department, City Hall 10th Fl., 455 N. Main St., Wichita, KS 67202-1688, before 4:00 p.m. on the designated closing date, as established by the Board. Incomplete applications will be returned to the applicant.
- 8. Applicants are advised not to engage in *ex parte* communication with the Members of the Board of Zoning Appeals. All materials and communication prior to the public hearing shall be directed to the Secretary, who shall cause such to be entered into the official record on the variance request.
- 9. Variances may only be granted upon an affirmative vote of at least four of the seven Members of the Board of Zoning Appeals, even if fewer than seven attend the public hearing. Applicants are advised that failure to receive four affirmative votes will result in the denial of the variance request.
- 10. The regular meeting date of the Board of Zoning Appeals is the fourth Tuesday of each month at 1:30 p.m. in the 10th Floor Conference Room, City Hall, 455 North Main, Wichita, KS. Alternate meeting dates may be scheduled upon approval of the Board.
- 11. Any person, official, or governmental agency dissatisfied with any order or determination of the Board of Zoning Appeals may bring an action within 30 days in the District Court of Sedgwick County to determine the reasonableness of any such order or determination.

APPLICATION

This form MUST be completed and filed at the Planning Department, Tenth Floor, City Hall, 455 N. Main St., Wichita, KS, 67202 in accordance with directions on the accompanying instruction sheet. AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED. Check the appropriate box below for type of application being submitted. A separate application form and filing fee is required for each application. A preapplication conference with the planning staff is recommended before filing this application.

	\$	SECTION I	
This property is located within:	Wichita	Sedgwick Coun	ty (unincorporated)
Metropolitan Area Planning Commissi	ion:		
Zone Change: From zoning d	istrict:	to	
Planned Unit Development:	Approval	Amendment to PUD	Adjustment to PUD
Community Unit Plan: A	pproval Ar	mendment to CUP	Adjustment to CUP
Protective Overlay: Appro	val Ame	ndment to PO	Adjustment to PO
Conditional Use: To allow: Adjustment to approved site plan	ı. CU No.		zone district:
Vacation of:	unto about for local doc	scription, if necessary.)	zone district:
Administrative Permit: To alle	_	cription, it necessary.)	zone district:
Board of Zoning Appeals:			
Variance: To allow:			zone district:
Appeal of:			zone district:
Zoning Adjustment: To allow	:		zone district:
	<u> </u>	SECTION II	
The application area is legally described.	cribed as Lot(s)	; Block(s)

1.	The application area is legally	y described as Lot(s)	;	Block(s)
		Addition, (Wichita) Se	edgwick County, KS. If appro	opriate, a metes and bounds
	description may be attached.			

- 2. The application area contains acres.
- 3. This property is located at (address) which is generally located at (relation to nearest streets)
- 4. We file this request for the following reasons:
- 5. County control number:

6.	The names of the owners of all property included in this application MUST be listed as applicants. Contract purchasers, lessees or others directly associated with the property may also be listed if they desire to be advised of the proceedings. (Use a separate sheet for additional applicants if needed.)						
	A.	APPLICANT ADDRESS			PHONE ZIP CODE		
		AGENT ADDRESS		PHO ZIP (NE CODE		
	B.	APPLICANT ADDRESS		PHO ZIP (NE CODE		
		AGENT ADDRESS		PHO ZIP (NE CODE		
	C.	APPLICANT ADDRESS		ZIP (NE CODE		
		AGENT ADDRESS		PHO ZIP (NE CODE		
	as re infor Boar	application cannot be processed unless equired in the instruction sheet; and is rmation is true and correct to the best rd of Zoning Appeals shall have authoric interest and welfare. Applicant's Signature	s accompanied by the t of our knowledge. W	appropriate fee. We fur e acknowledge that the	ther certify that the fore MAPC, Governing B ecessary in order to ser	egoing ody, or	
	Applicant's Signature		By	Authorized Ag	Authorized Agent (If Any)		
		Applicant's Signature	By	Authorized Ag	ent (If Any)		
		tion must bear the signature(s) of the all sign his own name and attach the o	* * * · · · ·	Ŭ,		alf, the	
		CE USE ONLY					
		Zoning (N) (S) Commission District					
Dat	te	Fee	Received By				
Re	•	d Documents:		□	П <i>с</i> т. тт	П «-	
\perp	. Own	ership List BZA Justification	Legal Description	☐ Vacation Petition	n	Signs	